

STATEMENT OF ORGANIZATION		OFFICE USE ONLY									
1. Name and Address of Committee CORNELIUS E. (CONN) REGAN P. O. Box 395 Metairie, LA 70004 Check If: New Committee _____	2. Date of this Statement <div style="text-align: center;">7/20/2015</div>	Report Number: 49632 Date Filed: 7/20/2015									
	3. Estimated Membership <div style="text-align: center;">20</div>										
	4. Amended Statement? <div style="text-align: center;"><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div>										
5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors) <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 33%;"><u>a. Name</u></th> <th style="text-align: left; width: 33%;"><u>b. Position</u></th> <th style="text-align: left; width: 34%;"><u>c. Address</u></th> </tr> </thead> <tbody> <tr> <td>RALPH CAPITELLI</td> <td>Chairperson</td> <td>1100 Poydras St. Suite 2950 New Orleans, LA 70163</td> </tr> <tr> <td>GREGORY RITTINER</td> <td>Treasurer</td> <td>659 Leson St. Harvey, LA 70058</td> </tr> </tbody> </table>			<u>a. Name</u>	<u>b. Position</u>	<u>c. Address</u>	RALPH CAPITELLI	Chairperson	1100 Poydras St. Suite 2950 New Orleans, LA 70163	GREGORY RITTINER	Treasurer	659 Leson St. Harvey, LA 70058
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GREGORY RITTINER	Treasurer	659 Leson St. Harvey, LA 70058									
6. Affiliated Organizations <small>(Any organization other than a political committee which directly or indirectly established, administers, or financially supports this committee.)</small> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 33%;"><u>a. Name</u></th> <th style="text-align: left; width: 33%;"><u>b. Address</u></th> <th style="text-align: left; width: 34%;"><u>c. Relationship to Committee</u></th> </tr> </thead> <tbody> <tr> <td colspan="3" style="height: 40px;"></td> </tr> </tbody> </table>			<u>a. Name</u>	<u>b. Address</u>	<u>c. Relationship to Committee</u>						
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7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market mutual funds.) <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 33%;"><u>a. Name</u></th> <th style="text-align: left; width: 33%;"><u>b. Address</u></th> </tr> </thead> <tbody> <tr> <td colspan="2" style="height: 40px; text-align: center;">On attached sheet</td> </tr> </tbody> </table>			<u>a. Name</u>	<u>b. Address</u>	On attached sheet						
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8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Check one: <input checked="" type="checkbox"/> Principal Campaign Committee <input type="checkbox"/> Subsidiary Committee											
b. Name of Candidate CORNELIUS E. (CONN) REGAN	c. Office Sought by the Candidate Comm. to Re-Elect Cornelius E. Regan										
9. a. Name of Person Preparing Report CYNTHIA AUSTIN b. Daytime Telephone 504-450-8722											
10. WE HEREBY CERTIFY that the information contained in this STATEMENT OF ORGANIZATION is true and correct to the best of our knowledge, information and belief. This <u>20th</u> day of <u>July</u> , <u>2015</u> . <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; vertical-align: bottom; padding-top: 20px;"> <u>Ralph Capitelli</u> Signature of Committee/Chairperson </td> <td style="width: 40%; vertical-align: bottom; padding-top: 20px;"> _____ Daytime Telephone </td> </tr> <tr> <td style="vertical-align: bottom; padding-top: 20px;"> <u>Gregory Rittiner</u> Signature of Committee Treasurer, if any </td> <td style="vertical-align: bottom; padding-top: 20px;"> _____ Daytime Telephone </td> </tr> </table>			<u>Ralph Capitelli</u> Signature of Committee/Chairperson	_____ Daytime Telephone	<u>Gregory Rittiner</u> Signature of Committee Treasurer, if any	_____ Daytime Telephone					
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7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market mutual funds.)

a. Name

IBERIA BANK

b. Address

2900 Ridgelake Dr.
Metairie, LA 70002